

# My Head

## PRESSURE

by Lt. Przemyslaw J. Kaczynski

**“Somebody parked an elephant in my skull and it stinks.”**

I had just walked into the flight surgeon's office early in the morning, eager to get back on the flight schedule. For the last four days I had been med down with a head cold. The doc had prescribed the usual doses of meds, tons of liquids, and the dreaded “healing chair” duty.

Fortunately, I had missed only one dedicated fly day as the carrier steamed southwest for WestPac. Our air wing tempo was unusually slow during the transit, and a number of us were close to losing our night quals. While I was med down, my night qual had expired. I needed to get a day and night trap to reclaim my qual. I had overheard some grumbings, from on high, how guys shouldn't need to be going med down when they're flying a plane with a pressurized cabin.

It was my first cruise, and as a nugget I was determined to be a reliable player. That's why I guaranteed my operations and schedules officers when I'd be flying again. Surprisingly, the nasal congestion, heat flashes, and coughing had come nearly to a halt on the morning when I was scheduled for two flights. Proudly, I walked into the doc's office and announced I was in shape to fly. I didn't have much trouble clearing my ears, although it was a little harder than usual. The doc did a couple of routine checks, saw I could clear my ears, and cleared me to fly. Like a proud owner of a hot-car pink slip, I waltzed right into the brief with my up-chit and set up the flight.

The hop was simple: the standard E-2 stationed at 18,000 feet in support of a gun exercise. Except for a trim malfunction off the cat-shot, man-up and launch went smoothly. After trouble-

shooting and solving the trim problem, we continued as planned and started our climb to reach station. As expected, I could clear my ears as the aircraft pressurized to 5,000 feet. A little bit of jaw movement here, some preemptive valsalva over there, and my eardrums should be in great shape. We targeted our level off at angels 18.

Throughout the climb, my head felt a little clogged and tight. I thought, “The cabin pressure is only going to 5,000 feet. My head will adjust to the altitude.” After about 30 minutes on station, my slight discomfort started to feel like a freezing ice pick jammed sideways above my left eyebrow. As I struggled to ignore it, I realized I was not going to contribute 100 percent of my situational awareness during this hop. My copilot (a cruise-seasoned pilot and plane commander) noticed I was unusually quiet on profile. He tried to talk to me, but my answers were abrupt. He started to see that I was focusing on something else, but I could tell he wasn't sure what it was. After 45 minutes, the ice pick in my skull had grown into a rumbling bulldozer. I decided to tell my copilot I was having a problem. “Man, I think I might be having a sinus block,” I said. “Somebody parked an elephant in my skull and it stinks.”

We decided that if the pain persisted or got worse, we would swap seats, allowing him to take the trap. I didn't want to be having that conversation since losing a trap during the day meant I wasn't going to be a night player. Besides, what would a single-seat guy do in scenario like this? Am I half the pilot they are if I give up the controls? These issues found their way into my pounding head as I continued in the pilot's seat. An hour after our conversation, any doubts about whether it was a good idea or bad idea vanished.

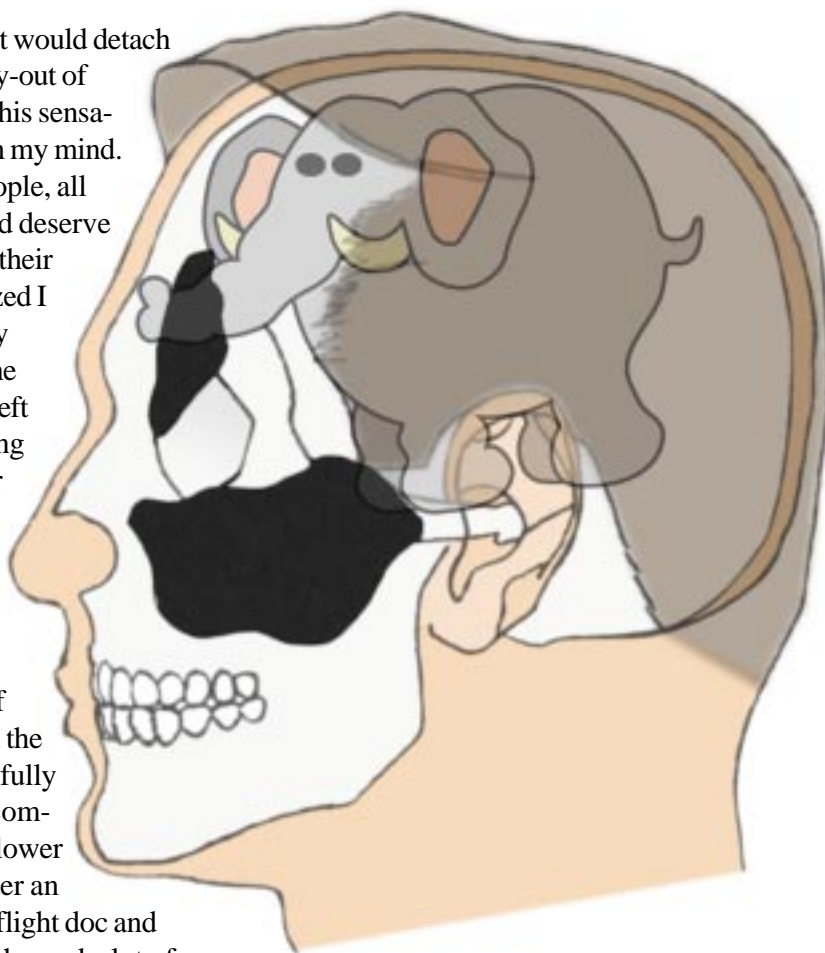
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## CHAMBER

Suddenly my left eyebrow felt like it would detach itself from my melon. A pulsing gray-out of vision in my left eye accompanied this sensation. A number of things ran through my mind. First, I was flying a crew of five people, all who have fine lives of their own and deserve the best pilot behind the controls of their \$85-million aircraft. Second, I realized I had allowed pride to be a part of my ORM decision-making process in the last hour. Finally, with vision in my left eye acting strangely, how was I going to be sure the descent to the carrier wasn't going to make it worse?

I told my copilot I was feeling a lot worse. We told the crew we would have to swap seats. We also needed to tell our ready room to remove me from my upcoming brief and flight in the evening. I assumed the copilot duties, and we started a carefully executed Case II approach that accommodated my clogged up head. The lower we got, the better my head felt. After an uneventful recovery, I revisited the flight doc and underwent a series of X-rays that showed a lot of congestion in my upper and lower sinuses.

I kept asking myself how I could have gone flying in such a congested state. After a few weeks of healing and SDO duty, I had added a few items to my ready-to-fly philosophy. Never give yourself a deadline to get better. Your body will tell you when you are ready, and in the case of sinus infections or congestion, it can take a week or two. Don't let your mind trick your body into false health. Just because you can valsalva doesn't mean that you are OK to fly. There is no test,



short of X-rays, that will tell you or the flight doc that you are ready to fly. When it comes to crew coordination in multi-crew aircraft, the crew must be comfortable confessing and assessing their own risk to the mission, aircraft, and crew members and come up with an intelligent response. In our case, the copilot was in a better state to perform a carrier landing than I was, no doubt about it. 🛩️

Lt. Kaczynski flies with VAW-116.